

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-weight: bold;">10766613</div>		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
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Total Depend	15										
Total Claims	19										
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Applicant(s)

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Total Depend	15					
Total Claims	19					